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PATENT

Attorney Docket No.   TRW(AEC)6685

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

NEW APPLICATION TRANSMITTAL

Transmitted herewith for filing is the patent application of Inventor(s):   Ernst Hafner, Peter Bubb and Matthias Gotz

For (title):   **OPERATING MEANS FOR A CRUISE CONTROL IN VEHICLES**

Enclosed are:

1.   **Papers Required for Filing Date Under 37 CFR 1.53(b):**

    __3__   Pages of specification

    __1__   Pages Abstract

    __1__   Pages of claims

    __1__   Sheets of drawing

        ☒   formal (Figs.   -   )

        ☐   informal

In addition to the above papers there is also attached:

CERTIFICATION UNDER 37 CFR 1.10

I hereby certify that this New Application Transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service on this date __August 5, 2003__ in an envelope as "Express Mail, Post Office to Addressee". Mailing Label Number __ET924151150__ addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Deborah Denn
(Type or print name of person mailing paper)

(Signature of person mailing paper)

2. **Declaration or oath:**

☐ Enclosed (Executed)

☒ Not Enclosed.

3. **Language:**

☒ English

☐ Non-English

☐ A verified English translation of the

☐ specification and claims

☐ declaration

is attached.

4. **Assignment:**

☒ An assignment of the invention to ___TRW Automotive Electronics & Components GmbH & Co. KG___

☐ is attached.

☒ will follow

5. **Certified Copy:**

Certified copy (ies) of application (s)

GERMANY	102 36 224.6	7-Aug-02
(Country)	(Appln. No.)	(Filed)
(Country)	(Appln. No.)	(Filed)
(Country)	(Appln. No.)	(Filed)

from which priority is claimed

☒ is attached

☐ will follow

EXPRESS MAIL NO. ET924151150

6. Fee Calculation:
(Small entity filing fee is 50% normal fee)

CLAIMS AS FILED				
Number Filed		Number Extra	Rate	Basic Fee
				$ 750.00
Total Claims	6	-20 =	X $ 18.00	-0-
Independent Claims	1	- 3 =	X $ 84.00	-0-
Multiple dependent claim(s), if any			+ $280.00	

☐ Amendment canceling extra claims enclosed

☐ Amendment deleting multiple dependencies enclosed

☐ Fee for extra claims is not being paid at this time

Filing Fee Calculation   **$750.00**

7. Small Entity Statement

☐ The present application is being filed by or on behalf of a **small entity** as defined in 37 CFR 1.9 and 1.27 for purposes of paying reduced fees.

8. Fee Payment Being Made At This Time:

Enclosed:

☒ basic filing fee   **$750.00**

☐ assignment recordal fee $_____

☐ for processing an application with a specification in a non-English language $_____

Total fees enclosed   **$750.00**

9. Method of Payment Fees:

☒ check in the amount of **$750.00** _____ enclosed.

☒ The Commissioner is hereby authorized to charge any **DEFICIENCY** in the filing fees for this application to our Deposit Account No. 20-0090.

10. Instructions As to Overpayment:

☒ refund

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SIGNATURE OF ATTORNEY, REG. NO. 20,177

THOMAS L. TAROLLI
Type or print name of attorney

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